, 	And the state of t
State of Arizona,	Arizona State Board of Health Local Reg. No. 1
County of Se	_ 1 35. VIIAL STATISTICS
County of A 1	Affidavits for Correction of a Record Town of
A.W.	samo of Ellahe line
Arisona, being f	Ame of Affiant) (Address) (Address) (Address)
of Helda,	(If related specify degree—If friend or otherwise, so state)
	in the City of Slave
County of	on the day of May 1914
	ficate of birth/death filed by G. T. Stundon M. (Give name of physician or midwife for birth-Undertaker for death)
with the Local Re	gistrar for Diela , Arizona, on 6 25-14
That the follo	(Date)  (Date)  (Date)
Jem 22	puchplace of mother.
The est	
I nat affiant i	upon his own knowledge states the true facts to be, and the changes necessary to
To itu. Tas	precet are, as follows: change item 22 to bential
,	ound and and
	(Affiant) Car A 1/1/1 and
	(Address) The Ping & PO BOX 1272
Subscribec 15	d sworn to before me this 8th day of Cane
State of Arizona	Notary Public 10 Sterm
County of Lik	My Commission expires Jav 4-1945 Address Clobe hegor
Golden .	Hunsaker of Bloke aregona
	(Address)
alleged and that the	t duly sworn, deposes and says that he/she has knoweldge of the facts hereinbefore ne said facts as stayed therein are true.
· ·	(Affiant) Holden J. Humaken
	(Address) 345 So. 3 7 St. Aloge, any.
Subscribed û	d sworn to before me this 8th day of June 1773
•	Notary Public 20 & Heron
Form V. S. 1	My Commission expires Jan 4.1943 Address Dloke Curson
	<u> </u>